## 3020242204

FE5AN018

**FEC** FORM 3

## REPORT OF RECEIPTS

For An Authorized Committee

13 MAY 20 PM 1: 24

	1 of All Authorized Committee	Office Use Only
NAME OF TYPE     COMMITTEE (in full)	E OR PRINT ▼ Example: If typing, type over the lines.	12FE4M5
Georgians for Isakson		
ADDRESS (number and street)	ost Office Box 250116	
Check if different than previously reported. (ACC)	tlanta	GA 30325
2. FEC IDENTIFICATION NUMBER	ER ▼ CITY ▲	STATE ZIP CODE
C C00384693	3. IS THIS NEW REPORT (N) OR	AMENDED GA 00 L GA 00
4. TYPE OF REPORT (Choose  (a) Quarterly Reports:  April 15 Quarterly Report  July 15 Quarterly Report  October 15 Quarterly Re  January 31 Year-End Re  Termination Report (TER	(b) 12-Day PRE-Election Report for the:  Primary (12P)  Convention (12C)  Election on  Poort (YE)  (c) 30-Day POST-Election Report for the	General (12G)  Special (12S)  In the State of  Runoff (30R)  Special (30S)  In the State of  Special (30S)
5. Covering Period 01 / 2013 through 03 / 31 / 2013		
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.		
Signature of Treasurer  Date  Date  Date		
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.		
Use		FEC FORM 3